

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

(Schedule E)

PAGE 1 OF 1
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Freedom Partners Action Fund, Inc.		FEC IDENTIFICATION NUMBER ▼ C C00564765	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee I360			Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 17 / 2016		
Mailing Address PO BOX 37046			Amount 57784.00		
City BALTIMORE	State MD	Zip Code 21297	Transaction ID : SE24.817		
Purpose of Expenditure MEDIA PLACEMENT - SATELLITE		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 08 / 11 / 2016		
Name of Federal Candidate TED STRICKLAND		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: OH		
Calendar Year-To-Date Per Election for Office Sought		8056883.37	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee I360			Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 17 / 2016		
Mailing Address PO BOX 37046			Amount 434200.00		
City BALTIMORE	State MD	Zip Code 21297	Transaction ID : SE24.816		
Purpose of Expenditure MEDIA PLACEMENT - BROADCAST/CABLE		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 08 / 11 / 2016		
Name of Federal Candidate TED STRICKLAND		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: OH		
Calendar Year-To-Date Per Election for Office Sought		8056883.37	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	491984.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	491984.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Thomas F. Maxwell III

[Electronically Filed]

Date

MM / DD / YYYY
08 / 17 / 2016

Signature